PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10598396

| CLAIMS AS FILED - PART I | | | | | | | SMALL ENTITY | | OTHER THAN | | |
|--|--|--|--|---|-----------------------|---------------------------------|---------------------|------------------------|------------------|------------------|------------------------|
| | | | (Column 1) | | (0 | Column 2) | TYPE | | OR | SMALL ENTITY | |
| U.S. NATIONAL STAGE FEES | | | | pul | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT: = \$ 150 LARG | | | E ENT. = \$ 300 | BASIC FEE | | OR | BASIC FEE | 30 |
| EXAMINATION FEE | | | | | | er situations = 100 / \$ 200 | EXAM. FEE | | | EXAM. FEE | 20 |
| SEARCH FEE | | | T ALL OBELCOUNINES ≅ T | | | ner situations = 250 / \$ 500 | SEARCH FEE | | | SEARCH FEE | 40 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| ТОТ | AL CHARGEAE | BLE CLAIMS | 39 minus 20 = * | | | 19 | X \$ 25 = | | OR | X \$ 50 = | 95) |
| INDE | PENDENT CL | AIMS | minus 3 = * | | | | X \$ 100 = | | OR | X \$ 200 = | 700 |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | SENT " | | | | + \$ 180 = | | OR | + \$ 360 ≐ | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | | OR | TOTAL | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | SMALL E | NTITY | OR | OTHER SMALL E | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMB PREVIOU PAID F | ER JSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 ≃ | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| TOTAL ADDIT. FEE | | | | | | | | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | (O = 1, | - O) | (0.1 | | | | | |
| AMENDMENT B | | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Colum HIGHE NUMBI PREVIOL PAID F | ST ER JSLY | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| ** | If the "Highest Nu If the "Highest Nu | imn 1 is less than the imber Previously Pai imber Previously Pai nber Previously Paid | d For" IN THIS SI d For" IN THIS SI | PACE is less PACE is less | than '20 than '3', | ', enter "20". enter "3". | | in column 1. | | | |